Office of Senator Richard Shelby 2011 Intern Application

304 Russell Senate Office Building Washington, DC 20510 Telephone: (202) 224-5744

Fax: (202) 224-3416

Name:			
Hometown:			
School:			
Current Year in School:			
Major:			
GPA:			
Names and Addresses of at L	east Three References:		
Desired Internship Date:	☐ First Session	Second Session	☐ Either
The dates are June 6 to	July 1 (first session) and	I July 11 to August 5 (seco	nd session).

You may attend only one session. If you have flexibility as which to session you can attend, please indicate this by ranking them in order of preference, as we may not be able to offer some applicants their first choice.

State specific issues and areas of interest to you:				
Have you served a prior internship in Washington D.C. ? Yes No				
If yes, with whom?				
Skills applicable to internship:				
Schools attended, beginning with your current school:				
If you are currently enrolled in College/University, please answer the following:				
Is academic credit available for internships?				
Graduation Date:				

Activities/Honors:			
Career Objectives:			
Advisor's Name:			
Your Contact Information	n: Street Address:		
City:	State:	Zip Code:	
Permanent Address/Parents	'names:		
Street Address:			
City:	State:	Zip Code:	
Cell:			
Email Address:			
Date of Birth:			

Please use this space to write a brief paragraph about yourself, including the reasons why you would like to intern in the Office of Senator Richard Shelby:				